

## Sponsor's Notice of Change of Address

### INSTRUCTIONS

#### Purpose of This Form

Please use this form to report your new address and/or residence, as required by 8 U.S.C. 1183a(d) and 8 CFR 213a.3. You may photocopy the blank form for use in reporting future changes of address.

#### Who Completes This Form?

A sponsor of an immigrant, under section 213A of the Immigration and Nationality Act, is required to report his or her change of address within 30 days of the change if the sponsorship agreement is still in force. The sponsorship agreement remains in force until the sponsored immigrant becomes a U.S. citizen, can be credited with 40 quarters of work, departs the United States permanently, or dies.

#### General Filing Instructions

Please answer all questions by typing or clearly printing in black ink. Indicate that an item is not applicable with N/A. If an answer is "none", please so state. If the sponsor is a permanent resident, the sponsor must also comply with the change of address reporting requirement in 8 CFR 265.1.

#### Where to File This Form

If your new address is in Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, New Mexico, North Carolina, Oklahoma, South Carolina, Tennessee, or Texas, mail this form to:

USINS TSC  
P.O. Box 851804  
Mesquite, TX 75185-1804

If your new address is in Connecticut, Delaware, District of Columbia, Maine, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Puerto Rico, Rhode Island, Vermont, Virginia, or West Virginia, mail this form to:

Vermont Service Center  
P.O. Box 9485  
St. Albans, VT 05479-9485

If your new address is in Arizona, California, Hawaii, or Nevada, mail this form to:

California Service Center  
P.O. Box 10485  
Laguna Niguel, CA 92607-0485

If your new address is elsewhere in the United States, or you have moved abroad, mail this form to:

Nebraska Service Center  
P.O. Box 87485  
Lincoln, NE 68501-7485

#### Penalties

If the sponsor fails to give notice of a **change in his or her address**, as required by 8 U.S.C. 1183a(d) and 8 CFR 213a.3, the **sponsor may be liable for the civil penalty** established by 8 U.S.C. 1183a(d). The amount of the civil penalty will depend on whether the sponsor failed to give this notice knowing that the sponsored immigrant(s) have received means- tested public benefits.

#### Privacy Act Notice.

Authority for the collection of the information requested on this form is contained in 8 U.S.C. 1183a(d). The information will be used principally by the Service to verify a sponsor's compliance with the change of address requirement, and to notify agencies that furnish means-tested public benefits of the sponsor's change of address, if requested. The sponsor is required by statute to provide this change of address.

The information may also, as a matter of routine use, be disclosed to other Federal, State, and local agencies providing means-tested public benefits for use in civil action against the sponsor for breach of contract. It may also be disclosed as a matter of routine use to other Federal, State, local, and foreign law enforcement and regulatory agencies to enable these entities to carry out their law enforcement responsibilities. Failure to provide the information may result in the imposition of the penalty established in 8 U.S.C. 1183a(d).

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**START HERE - Please Type or Print**      **Answer all Questions**

### Part 1. Information about Sponsor

Last Name		First Name		Middle Name
Date of Birth (Month, Day, Year)			Place of Birth (City, State, Country)	
A-Number (If any)			Social Security Number	
My <b>New</b> Mailing Address (Street Number and Name)			Apt/Suite Number	<b>FOR AGENCY USE ONLY</b> Receipt
City		State or Province		
Country	ZIP/Postal Code	Telephone Number		
My <b>New</b> Place of Residence if different from above (Street Number and Name)			Apt/Suite Number	
City		State or Province		
Country	ZIP/Postal Code	Telephone Number		
Effective Date of Change of Address				

### Part 2. Sponsor's Signature

I certify under penalty of perjury under the laws of the United States of America that all information on this notice is true and correct.

Signature	Date	Daytime Telephone
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### Part 3. Signature of person preparing notice if other than sponsor

I declare I prepared this application at the request of the above person and it is based on information of which I have knowledge.

Signature	Date	Daytime Telephone
Last Name (Print)	First name	Middle Initial
Firm Name and Address (Print)		

#### Public Reporting Burden

**Paperwork Reduction Act Notice.** Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. The estimated average time to complete and file this form is 15 minutes. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Immigration and Naturalization Service, HQPDI, 425 I Street, N.W., Room 4034, Washington, DC 20536, OMB No.1115-0215. **DO NOT MAIL THIS FORM TO THIS ADDRESS.**